PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

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DECLARATION FOR UTILITY OR DESIGN			Attorney Docket Numbe	r US030246	
			First Named Inventor Anthonie H. Bergmet.al.		
PATENT APPLICATION (37 CFR 1.63)		COMPLETE IF KNOWN			
		Application Number	1		
☑Declaration Submitted (With Initial Filing	OR	Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))	Filing Date		
			Group Art Unit		
		required)	Examiner Name		

				_			
As a below named inventor, I hereby declare that:							
My residence, post office address, and citizenship are as stated below next to my name.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
	ELECTRONIC PAINT ACTIVATION WITH REGISTRATION CODES						
the specification of which (Title of the Invention)							
☑ is attached hereto							
OR							
	□ was filed on (MM/DD/YYYY) as United States Application Number or PCT International						
Application Number and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT							
international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America Historia Bulling and Country of the Historia Bul							
States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	o it is a second of the sec						
	Country	(MM/DD/YYYY) Country	Not Claimed	YES	NO		
Additional foreign applicat	ion numbers are listed on a su	pplemental priority data sheet	PTO/SB/02B attac	hed hereto:			

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box 1450, Alexandria, VA 22313-1450.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: x Customer Number or Bar Code Label *24737*							
				OR	Correspondence address below		
	PATENT TRA	ADEMARI	K OFFICE	E			
Name: PHILIPS INTELLECTUAL PROPERTY & S	TANDARDS						
Address: P. O. Box 3001							
City: Briarcliff Manor	State NY			Zii	ZIP 10510-8001		
Country U.S.A.	Telephone: (91	14) 332	-0222		Fax: (914 332-0615		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:	A petition	n has l	been f	iled for th	is unsigned inventor		
Given Name Anthonie H. (first and middle [if any])	Family Name Bergman or Surname			gman			
Inventor's Signature				Date &	18/5/09		
Eindhoven			NL		NL		
Residence: City	State		Country		Citizenship		
Vondelstraat 18							
Mailing Address							
Eindhoven		5671 VB		VB	NL		
City	State	Zip			Country		
NAME OF SECOND INVENTOR: A p	etition has bee	en filed	for th	is unsign	ed inventor		
Given Name Hubertus M. R. (first and middle [if any])			ly Nam		enraad		
Inventor's Signature & Superol.				Date 人	10/5/2004		
Eindhoven			NL		NL		
Residence: City	State	State Country		Citizenship			
Penelopestraat 239							
Mailing Address							
Eindhoven		ĺ	5631CN N		NL		
City	State		Zip Country		Country		
Additional inventors are being named on the	supplemental A	dditiona	l Invento	or(s) sheet(s	s) PTO/SB/02A attached hereto.		

Please type a plus sign (+) inside this box — +

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle	[if any])	Family Name or Surname				
Martin G. H.		Hiddink				
Inventor's Signature & M			Date K 11 - 5 - 2034			
Residence: City Eindhoven	State	NL Country	Date K 11 - 5 - 2034 Citizenship			
Mailing Address Lisztstraat 2						
Mailing Address						
City Eindhoven	State	5654 SR ZIP	NL			
Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle	[if any])	Family Name or Sumame				
Inventor's Signature			Date			
Residence: City	State	Country	Citizenship			
Mailing Address						
Malling Address						
City	tate	Zip	Country			
Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle	[if any])	Fa	mily Name or Sumame			
•						
Inventor's Signature			Date			
Residence: City	State	Country	Citizenship			
Mailing Address						
Mailing Address						
City	State	Zip	Country			

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PTO/SB/80 (11-04)
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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).								
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OR								
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		Name	Registration Number		N	ame		Registration Number
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A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be								
filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee,								
and must identify the application in which this Power of Attorney is to be filed.								
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee								
Signatu	re	Rad E. H.	aur	<u> </u>		Date 14	Januar	y 2005
Name	Harne Michael E. Marion Telephone (914) 333-96			33-9637				
Title								
This sall	ation of information is	- considered by 27 OFD 4 24 4 22	4 22 The			- t - ! L 64	Acceptance and the contract of	lab to be file to a

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

10/565668

PTO/SB/96 (08-03)

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STATEM	ENT UNDER 37 CAR 23(6) C'd PCT/PTO 23 JAN 200
Applicant/Patent Owner: Koninklijke Philips Electronics	N.V.
Application No./Patent No.: Concurrently	_ Filed/Issue Date: Concurrently
Entitled: ACTIVATION OF ELECTRONIC PAINT WITH	REGISTRATION CODES
Koninklijke Philips Electronics N.V. (Name of Assignee)	
states that it is: 1.	est; or
 an assignee of less than the entire right, title a The extent (by percentage) of its ownership in the patent application/patent identified above by v 	terest is ———— %
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OR	
B. [] A chain of title from the inventor(s), of the pate below:	ent application/patent identified above, to the current assignee as shown
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[] Copies of assignments or other documents in th [NOTE: A separate copy (i.e., the original assig must be submitted to Assignment Division in ac recorded in the records of the USPTO. See MP	nment document or a true copy of the original document) cordance with 37 CFR Part 3, if the assignment is to be
The undersigned (whose title is supplied below) is a	authorized to act on behalf of the assignee.
1/20/06	Frank Keegan, Reg. 50,145
Date (914) 333-9669	Typed or printed name
Telephone number	Signature
	Corporate Counsel
	Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.